

LD9000068565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

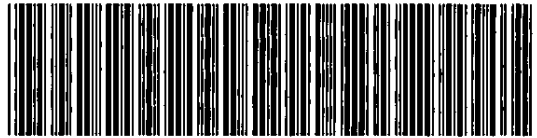
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR 17 AM 11:54

T. HAMPTON

MAR 18 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMPIRE EXOTICS HOLDINGS LLC, dba EMPIRE BRAKES
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

MICHAEL MUNCAN

(Contact Person)

EMPIRE EXOTICS HOLDINGS LLC, dba EMPIRE BRAKES

(Firm/Company)

9320 Crescent Loop Circle Apt. #301

(Address)

TAMPA, FL 33619

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL MUNCAN

(Name of Contact Person)

at (**813**) **523-7388**

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &

Certified Copy

check # 2155 enclosed

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

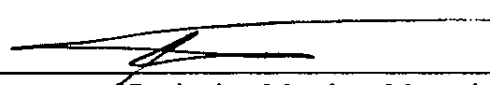
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: EMPIRE EXOTICS HOLDINGS LLC, ~~dba EMPIRE BRAKES~~.

2. This limited liability company was organized under the laws of:
the State of Florida.

3. The Florida document/registration number of this limited liability company is:
L09000068565/~~G090000135711~~.

4. I, MICHAEL MUNCAN, hereby resign as a MGRM
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. (copy enclosed)



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR 17 AM 10:54